

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>7891</i>	<i>6/18</i>
O.I.P.E. CLASSIFIER	<i>LD</i>	<i>7353</i>	<i>8-28-0</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	5	9	
2	26	22	
3	03	03	
4	1	1	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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